PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE **Commissioner for Patents** P.O. Box 1450 Alexandria, Virginia 22313-1450 (571) 273-2885

or <u>Fax</u>

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as m

indicated unless corrected maintenance fee notification	pelow or directed otherwise	in Block 1, by (a	i) specifying a	new correspondence addres	s; and/or (b) indicating a sep	arate "FEE ADDRESS" for
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block I for any change of address)				Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must		
	590 12/22/2005		18088	have its own certifica	ite of mailing or transmission.	
	RESEARCH PTY L	1	8 \	C I hereby certify that	ertificate of Mailing or Tran	ismission
393 DARLING STREET				States Postal Service with sufficient postage for first class mail in an envelope		
BALMAIN, NSW 2041 AUSTRALIA FEB 9.3 2005				I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.		
05/06/5000 HBEAENES 00	000061 10815622	TAN .	- NEWS F			(Depositor's name)
01 FC:1501 1400.00 OP			M. T.			(Signature)
02 FC:1504	300.00 DP					(Date)
APPLICATION NO.	FILING DATE		FIRST NAMED	INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/815,622			Paul Lapstun		HYT007US	2086
TITLE OF INVENTION: HAND-WEARABLE CODED DATA READ				pstun	111100703	2000
TITLE OF INVENTION. H	AND-WEARABLE CODE	D DATA KEADE	ĸ			
APPLN, TYPE	SMALL ENTITY	ISSUE F	FF T	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
	NO	\$1400	L	\$300	\$1700	03/22/2006
nonprovisional	nonprovisional NO			\$300	\$1/00 ¬	03/22/2000
EXAMINER		ART UNIT		CLASS-SUBCLASS		
TAYLOR, APRIL ALICIA		2876		235-462450		
	e address or indication of "Fe	ee Address" (37	2. For print	ing on the patent front page,		
CFR 1.363). Change of correspondence address (or Change of Correspondence)			(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,			
Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.			(2) the name of a single firm (having as a member a 2			
"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Custome Number is required.			registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.			
3. ASSIGNEE NAME AND	RESIDENCE DATA TO B	E PRINTED ON T	THE PATENT	(print or type)		
PLEASE NOTE: Unless recordation as set forth in	an assignee is identified be 37 CFR 3.11. Completion of	elow, no assignee of this form is NO	data will appe T a substitute f	ar on the patent. If an assign filing an assignment.	gnee is identified below, the	document has been filed for
(A) NAME OF ASSIGN	EE	(E	B) RESIDENCE: (CITY and STATE OR COUNTRY)			
Silvenheek '	Danasah Deu Ted	4			•	
Silverbrook .	Research Pty Ltd		Balm	main, NSW, Austra	alia	
Please check the appropriate	assignee category or categor	ries (will not be pr	inted on the pa	tent): 🗖 Individual 🗗	Corporation or other private g	roup entity 🚨 Government
4a. The following fee(s) are	enclosed:	41	o. Payment of F	ee(s):		
☐ Issue Fee			A check in the amount of the fee(s) is enclosed.			
Publication Fee (No small entity discount permitted)			Payment by credit card. Form PTO-2038 is attached.			
Advance Order - # of Copies			The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number (enclose an extra copy of this form).			
_ ` .	(from status indicated above	•		•		
	MALL ENTITY status. See :				ALL ENTITY status. See 37 (
The Director of the USPTO NOTE: The Issue Fee and P interest as shown by the reco	is requested to apply the Issuublication Fee (if required) words of the United States Pate	te Fee and Publica vill not be accepted ent and Trademark	tion Fee (if any d from anyone : Office.	 or to re-apply any previou other than the applicant; a re 	sly paid issue fee to the applic gistered attorney or agent; or t	ation identified above. the assignee or other party in
Authorized Signature	SMIN	>		Date	1	
Typed or printed name KEONIK NEWS				Registratio	January o	
This collection of information	on is required by 37 CFR 1.3	11. The information	on is required to	o obtain or retain a benefit by	the public which is to file (ar	nd by the USPTO to process)

an application. Confidentiality is governed by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.